

Quality Metrics Subcommittee Meeting Summary
June 10, 2014

Attendees

Dr. Jonathan Griffin, BCBS of MT

Dr. Pat Morrow, BCBS of MT

Desa Osterhout, BCBS of MT

Todd Harwell, Montana Department of Public Health & Human Services, Public Safety Division

Kathy Myers, Montana Department of Public Health & Human Services, Public Safety Division

Anna Buckner, Montana Medicaid

Mary LeMieux, Montana Medicaid

Kelley Gobbs, Montana Medicaid

Dr. Rob Stenger, Grant Creek Family Practice, Providence Medical Group

Craig Hepp, Billings Clinic

Jan Bechtold, Billings Clinic

Jaclyn Kincaid, MT Primary Care Association

Leslie Kilhan, Cascade County Health Department

Betsy Seglum, Glacier Community Health Center

Dr. Janice Gomersall, Community Physicians Group, Mountain View Family Medicine and Obstetrics

Kelly Gallipeau, Kallispel Regional Medical Center

Vicki Thusen, Montana Migrant Council

CSI Staff

Amanda Roccabruna Eby

Cathy Wright

Christina Goe

Feedback Reports

The subcommittee reviewed revised versions of the Patient-Level Data Feedback Report and the Aggregate Data Feedback Report that the public health department staff is developing for the PCMHs based on the quality metric data. Amanda described each of the edits, based on the discussion at the last meeting. Edits included confirmation that the HP2020 target measure is NHANES (National Health and Nutrition Examination Survey) for both blood pressure and A1C. All of the numerator numbers that were requested to be shown for each graph would be included in a table on the back page of the report since there isn't room for them on each graph. The wording on the hypertension figure was changed to read "documented hypertension" rather than "hypertension prevalence." Another back page was added to the reports to include an explanation on the methodology used.

An attendee requested the language on each graph with "other PCMHs" be clarified to indicate that that includes the PCMH receiving the report as well. Both reports need better labeling on the cover page to indicate whether it is a patient-level data report or an aggregate data report. The "Option 1" and "Option 2" is too confusing. The public health staff is on track to complete the reports by the end of June. When they are complete and sent to CSI to prepare for distribution to clinics, CSI will email them to the subcommittee first for a final review.

Blood Pressure Measure

The subcommittee compared PQRS specifications Version 7.0, (used by DPHHS), to PQRS specifications Version 7.1, (used by Mathematica). Version 7.0 includes measure #236 and NQF 0018 for blood

pressure and was initially chosen for year one's guidance because it aligns with the Million Hearts Initiative and Meaningful Use. In an initial review of 2015 PQRS specifications, attendees on the phone found Measure #236 to be identical to 2014 specifications.

Dr. Morrow moved and Todd Harwell seconded a motion for the subcommittee to adopt the 2015 PQRS blood pressure specifications, Measure #236/NQF 0018, including outpatient visit codes and diagnosis exclusions inadvertently omitted from year one's guidance. The motion passed unanimously.

A1C Measure

The subcommittee also compared PQRS specifications Version 7.0, (used by DPHHS), to PQRS specifications Version 7.1, (used by Mathematica). The A1C measure had less issues and differences to discuss. Similarly to the blood pressure measure, an attendee on the phone reported that 2015 PQRS specifications looked identical to 2014.

Todd Harwell moved and Dr. Morrow seconded a motion for the subcommittee to adopt the 2015 PQRS A1C specifications, Measure #1/NQF 0059, including diagnosis and encounter codes inadvertently omitted from year one's guidance. The motion passed unanimously.

The subcommittee will focus on updating guidance for the **immunization and the tobacco measures** at the next meeting on **July 8th**.